_	Effective October 1, 2003								09	651	1842	•
-	(Column 1) (Column 2)							LL E	YTITY	OR	OTHE SMALL	R THAN ENTITY
	OTAL CLAIMS	OTAL CLAIMS -					. R	ATE.	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	385.0	o log	BASIC FE	
T	OTAL CHARGE	ABLE CLAIMS	minus 20=		•		XS	9=	1		1	
IN	DEPENDENT (CLAIMS	. minus 3 ≈		•			3=	 -	OR		
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT							OR	X86=	
-	f the difference	e in column 1 is	less than z	ero, enter	*0" in (column 2	+14 TO	15=		OR	+290=	
	* If the difference in column 1 is less than zero, enter *0* in column 2 CLAIMS AS AMENDED - PART II								<u> </u>	OR	TOTAL	
_	8-26-05	8-26-05 (Column 1) (Column 2) (Column 3						ALL I	ENTITY	OR	OTHER SMALL	
DMENT A	:	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	RÁ	TE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
	Total	. 15	Minus	20	a Awa es		· XS	9_			Y\$18-	
AME	Independent	* 3	Minus	*** 3		£	X4:	3=		OR	X86=	
_	FINST PRESI	ENTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		+14	5=		OR	+290=	
							L	TAL	-		· TOTAL	
_		(Column 1)		(Colum	n 2)	(Column 3)	ADDIT.	FEE L		10	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
AME	Ind pendent	PRESENTATION OF MULTIPLE DEPENDENT CL			=	X43	=		OR	X86=		
	VII OT THESE	·	LIPLE DEP	ENDENT	LAIM		+145	=		OR	+290=	
						TAL	· · · ·	OB L	TOTAL			
	· · · · · · · · · · · · · · · · · · ·	(Column 1)	(Column 3)	ADDIT. I	-EE L	· · · · · · · · · · · · · · · · · · ·	J A	DDIT. FEEL				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST EA ISLY	PRESENT EXTRA	RATI		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= .	X\$ 9	_	, <u>u. </u>	OR	X\$18=	7,55
AME	Independent	*	Minus	***]	2	X43:	_			X86=	
ليا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	+		OR		
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR L	+290= TOTAL	
	t the inighest Nut	TIDE? PT EVIO USIY Pa	ld For IN THIS	SPACE IN I	oce than	2 0010/*2*	ADDIT. F	EE L			DOIT. FEE L	
	· · · · · · · · · · · · · · · · · · ·	ber Previously Paid	TO LIVE OF	uioepenaen	y is the f	nign est number	torna in the	appro	opriate box	in colu	mn 1.	
FORM	PTO-875 (Rev. 10	/03)					atent and Tr	ademat	k Office, Ų.	S. DEPA	TIMENT OF	COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number